

Good Shepherd Christian Academy
3740 W. Belden Ave.
Chicago, IL 60647
Phone (773-342-5854) Fax (773)342-6048

APPLICATION FOR ADMISSION AND RE-ENROLLMENT for 2020-2021

Date App. Received: ____/____/____

*** PLEASE PRINT ***

GENERAL POLICIES FOR ENROLLMENT

A non-refundable of \$50.00 per student must accompany ALL APPLICATIONS for enrollment. Please return the completed application with all necessary documentation to the school. The non-refundable of \$50.00 will be applied toward the 1st months Tuition.

CHILD'S NAME

ENTERING GRADE

GENDER: Male Female

ADDRESS

CITY

ZIP CODE

HOME PHONE # or CHECK IF NO HOME PHONE

New Enrollment _____
NEW APPLICANTS ONLY: NAME OF SCHOOL LAST ATTENDED OR NOW ATTENDING

Student's Information:

AGE

_____/_____/_____
DATE OF BIRTH

PLACE OF BIRTH – CITY, STATE *(Original Birth Certificate required - for new admissions only)*

Does child have any SPECIAL NEEDS / DISABILITY *(Please explain briefly.)*

Name of Home Church

Baptized? YES NO

Date and Location of Baptism

Denomination of Home Church

Confirmed? YES NO

Date and Location of Confirmation

Ethnic Identification: *(Please check one to assist us with statistical reports.)*

- White (Non-Hispanic) Hispanic
 Black or African American American Indian or Alaska Native Asian Pacific Islander Multi-Racial

Non-Discrimination Policy *Good Shepherd Christian Academy admits students of any sex, race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of sex, race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school administered programs.*
Please be sure to complete both sides of this application. Thank you! Updated 2-22-17

Student's Family Information:

Student Lives With:

- Both Parents Mother Father Step-Father
- Step-Mother Legal Guardian(s) Other

Legal Custody:

- Both Parents Mother Father Step-Father
- Step-Mother Legal Guardian(s) Other

MARITAL STATUS:

 MARRIED DIVORCED SEPARATED WIDOWED SINGLE

HOME ADDRESS

OCCUPATION

EMAIL ADDRESS

CELL PHONE #

WORK PHONE #

FATHER'S NAME (OR OTHER LEGAL GUARDIAN)

MARITAL STATUS:

MARRIED DIVORCED SEPARATED WIDOWED SINGLE

HOME ADDRESS

OCCUPATION

EMAIL ADDRESS

CELL PHONE #

WORK PHONE #

SIBLINGS - PLEASE LIST NAMES AND AGES OF ALL SIBLINGS (OLDER AND YOUNGER):

NAME AGE NAME AGE

NAME AGE NAME AGE

I wish to have my child enrolled at Good Shepherd Christian Academy and will support the school's program with prayer, participation, encouragement, and prompt financial payment.

DATE SIGNATURE

Parent e-mail (please print)

Do you want to receive information by text Cell Phone # _____

Who is your cell phone provider _____

e-mail _____ or Fast Direct

Check here if you are interested in Before / After School Care.

******* Checks need to be made payable Jehovah EL Buen Pastor Lutheran Church *******

Please be sure to complete both sides of this application. Thank you!

(For Office Use) Date: _____ Fee paid: _____ [] copy given to finance

Paid: Check # _____ Cash _____ (Initials) _____